

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A.P. DOONE		07-31-01
O.I.P.E. CLASSIFIER		12	07-31-01
FORMALITY REVIEW	PL	1080	9-7-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 -+ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date			
Final	Original	5/10/01	6/17/01	6/20/01
1	-	V	V	V
2	-	V	V	V
3	N	H	H	H
4	-	D	D	D
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21	N	N	N	N
22	-	V		
23		V	V	
24	N	N	N	H
25		D	D	D
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33		D	D	D
34		N	N	N
35		V	V	V
36		D	D	D
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44		D	D	D
45		V	V	V
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Claim	Date			
Final	Original			
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Claim	Date			
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If more than 150 claims or 10 actions  
staple additional sheet here

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